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RPTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	7	Application Number	10/825,567
		Filing Date	April 15, 2004
		First Named Inventor	Quake
		Group Art Unit	2872
		Examiner Name	Robinson, M. A.
Attorney Docket Number		20174C-013520US	

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) Return receipt postcard 2) PTO/SB/08A and PTO/SB/08B forms
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. Total number of pages <u>does not</u> include cited references.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm and Individual name	Townsend and Townsend and Crew LLP Randolph Ted Apple		Reg No. 36,429
Signature			
Date	August 18, 2005		

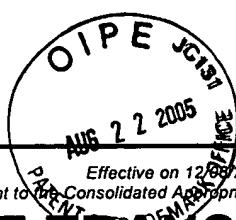
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August 18, 2005

Typed or printed name	Christopher R. Fitting		Date	August 18, 2005
Signature				

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Effective on 12/09/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 180.00)

Complete if Known

Application Number 10/825,567
Filing Date April 15, 2004
First Named Inventor Quake
Examiner Name Robinson, M. A.
Art Unit 2872
Attorney Docket No. 20174C-013520US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
-20 or HP =	x	\$	= \$0			
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
-3 or HP =	x	\$	= \$0			
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement (after office action)

Fees Paid (\$)

180.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 36,429	Telephone (650) 326-2400
Name (Print/Type)	Randolph Ted Apple		Date August 18, 2005

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PATENT
Attorney Docket No.: 20174C-013520US
Client Reference No.: CIT 3575-D

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P.O. Box 1450
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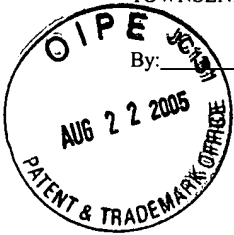
On

8/18/05

TOWNSEND and TOWNSEND and CREW LLP

By:

Qe *7dt*



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Quake et al.

Application No.: 10/825,567

Filed: April 15, 2004

For: MICROFABRICATED LENSES,
METHOD OF MANUFACTURE
THEREOF, AND APPLICATIONS
THEREOF

Examiner: Mark A. Robinson

Art Unit: 2872

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The reference cited on the attached PTO/SB/08A form is being called to the attention of the Examiner. A copy of the reference is not enclosed. It is respectfully requested that the cited reference be expressly considered during the prosecution of this application, and the reference be made of record therein and appear among the "references cited" on any patent to issue therefrom.

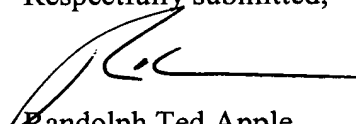
08/23/2005 MBERHE 00000040 201430 10825567

01 FC:1806 180.00 DA

As provided for by 37 CFR 1.97(g) and (h), no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information, and no inference should be made that the information and references cited are, or are considered to be material to patentability because they are in this statement. No inference should be made that the information and references cited are prior art merely because they are in this statement.

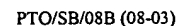
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Respectfully submitted,



Randolph Ted Apple
Reg. No. 36,429

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RTA:crf



Substitute for form 14498-PTD

(use as many sheets as necessary)

Sheet	2	of	2
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Complete if Known

<i>Application Number</i>	10/825,567
<i>Filing Date</i>	April 15, 2004
<i>First Named Inventor</i>	Quake, Stephen R.
<i>Art Unit</i>	2872
<i>Examiner Name</i>	Mark A. Robinson
<i>Attorney Docket Number</i>	20174C-013520US

NON PATENT LITERATURE DOCUMENTS

[illegible]

Examiner
Signature

Date
Considered

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.